EPA			Unite	United States Environmental Protection Agency Washington, DC 20460					Work Assignment Number 2–21			
	EF	A		Work Assignment					Other X Amendment Number:			
Contract	Number		Co	Contract Period 09/16/2014 To 09/15/2017				Title of Work Assignment/SF Site Name				
EP-D-14-032 Base Option Period Number 2								USEPA Megacity Partnership				
Contractor Specify Section and paragraph of Contract SOW												
INDUSTRIAL ECONOMICS, INCORPORATED 2,3,7,13,14												
Purpose:		Work Assig	ınment	Work Assignment Close-Out				Period of Performance				
X Work Assignment Amendment Incremental Funding												
X Work Plan Approval								From 09/16/2016 To 09/15/2019				
Comments:												
The revised work plan dated 11/4/2016 has been reviewed and is hereby approved for an additional 6 hours and \$3,275.96 (cumulative increase: LOE/2,356; Cost_Fee/\$308,134.24). No previously performed work shall be duplicated.												
Superfund Accounting and Appropriations Data							a	X Non-Superfund				
Note: To report additional accounting and appropriations date use EPA Form 1900-69A.												
SFO (Max 2)												
_	DCN Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (De	ollars) (0	Cents)	Site/Project (Max 8)	Cost Org/Code	
1												
2								-				
3								•				
4												
5								-				
Authorized Work Assignment Ceiling												
Contract Period: Cost/Fee: \$304,858.28 LOE: 2350 09/16/2014 To 09/15/2017												
This Action: \$3,275.96								6				
				4200 124 04				-				
Total: \$308,134.24 2,356												
Work Plan / Cost Estimate Approvals												
Contractor WP Dated: 11/04/2016								LOE: 6				
Cumulative Approved: Cost/Fee \$308, 134.24								LOE: 2,356				
Work Assignment Manager Name Sara Terry								Branch/Mail Code:				
			Pho	Phone Number: 919-541-7576								
(Signature) (Date)								FAX Number:				
Project Officer Name Carolyn Blake								Branch/Mail Code:				
								Phone Number: 919-541-5256				
(Signature) (Date)								FAX Number:				
Other Age	ency Offici	ial Name		Brai	Branch/Mail Code:							
			Pho	Phone Number:								
		(Signa		(Date)				FAX Number:				
Contracting Official Name Natalia Fisher-Jackson								nch/Mail Code	e:			
								Phone Number: 919-541-3564				
(Signature) (Date)								FAX Number:				